

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Jennifer LaRosa

Mailing Address 154 Princeton Avenue

City

Berkeley Heights

State

NJ

Zip Code

07922-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barnabas Health

Occupation

Manager, Patient Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : 22850402

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Mr. Darrell K Terry Sr

Mailing Address 88 Jessice Way

City

South Orange

State

NJ

Zip Code

07079-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barnabas Health

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : 22850406

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

C. Mr Edward Lamb

Mailing Address 10547 Wasatch Blvd

City

Sandy

State

UT

Zip Code

84092-4552

FEC ID number of contributing
federal political committee.

C

Name of Employer

IASIS Healthcare

Occupation

Western Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2015

Transaction ID : 22850432

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1377.50